

FY 2004-2005
Governor's Discretionary Grants

No Child Left Behind Act of 2001
Title IV, Part A, Subpart 1: Safe and Drug-Free Schools and Communities Act

Application Guidelines

Part I – Requirements and Selection Criteria

A. Introduction

The Michigan Department of Community Health and Office of Drug Control Policy (ODCP) are pleased to announce the FY 2004-2005 discretionary grant program. The program is supported under Title IV, Part A, Subpart 1: Safe and Drug-Free Schools and Communities Act (SDFSCA), Section 4112. The purpose of this grant program is to solicit proposals from communities for scientifically based prevention programs and activities that (1) prevent youth drug use and violence; (2) involve parents and communities; and (3) are coordinated with related state, school and community efforts and resources to foster a safe and drug-free learning environment that promotes student academic achievement. Under Title IV, Part A, funded programs and activities cannot duplicate the efforts of the State Education Agency or local school districts with regard to the provision of school-based drug and violence prevention activities.

Governor's Discretionary Grants (GDG) are competitive grants awarded for a one-year period. Current grantees must compete each year for renewal funding and continuation funding is not guaranteed. Funding is also dependent on the availability of federal funds.

B. Eligibility Requirements

Applications will be accepted from nonprofit community organizations, parent groups, anti-drug coalitions, juvenile and probate courts, local educational agencies, faith-based organizations, and other public and private nonprofit entities with a 501(c)(3) tax status.

C. Target Population

Proposed programs should target youth who are not normally served by the local educational agencies and community organizations. This would include populations that need special services or additional resources (such as youth in juvenile detention facilities, runaway or homeless youth, pregnant and parenting teenagers, and school dropouts). In reaching target populations, direct service projects can serve youth up to age 21 and should incorporate age-appropriate, developmentally appropriate and culturally sensitive programs and strategies.

D. Selection Criteria

Applications for grants will be reviewed and evaluated based upon:

- Compliance with the requirements of Title IV, Part A of No Child Left Behind and the application guidelines, and Education Department General Administrative Regulations (EDGAR).
- Overall quality of the proposed program and impact the project will have on reducing and preventing drug use and violence as demonstrated through the project narrative and evaluation.
- The extent to which the methods of evaluation are thorough, feasible, and appropriate to the goals, objectives, and outcomes of the proposed project; and the adequacy of the identified performance measures to demonstrate whether and to what extent the proposed program/strategy is meeting its objectives.
- Completeness and clarity in addressing each section of the GDG Application.

- Budget representing accountability and responsible grant expenditures, and cost-effectiveness of the proposed program. That is, the extent to which the costs are reasonable in relation to the number of youth (or others) to be served and to the anticipated benefits and results.
- Applicant's past compliance with financial and programmatic reporting. That is, accurate and informative reports are submitted by the due dates requested to fulfill contractual requirements.
- Results of a state-level peer review panel recommendations and comments.
- If a renewal application, the evaluation describing the present and past achievement, the results, and the effect the program has had on reducing and preventing drug use and violence. The effectiveness will be supported by statistical data and evaluation results, as well as the cost effectiveness of the program.

Special consideration is given to applicants that pursue a comprehensive approach to drug and violence prevention that includes providing and incorporating mental health services related to drug and violence prevention in their program.

E. Principles of Effectiveness

The federal *Principles of Effectiveness* provide the framework to assist States and local entities in designing, implementing, and evaluating high-quality programs and achieving measurable results. All entities that receive SDFSCA funds, either through grants or contracts, must comply with the *Principles*. For more information you may access the following website: www.ed.gov/offices/OSDFS/nrgfin.pdf.

Principle One: A program or activity shall be based on an assessment of objective data regarding the incidence of violence and illegal drug use in the elementary and secondary schools and communities to be served. This assessment must include an objective analysis of the current conditions and consequences regarding violence and illegal drug use that is based on ongoing local assessment or evaluation activities. Analysis of the conditions and consequences must include delinquency and serious discipline problems among students who attend such schools (including private school students who participate in the drug and violence prevention program).

Principle Two: A program or activity shall be based on an established set of performance measures aimed at ensuring that the elementary and secondary schools and communities to be served have a safe, orderly, and drug-free learning environment.

Principle Three: A program or activity shall be based on scientifically based research demonstrating that the program to be used will reduce violence and illegal drug use.

Principle Four: A program or activity shall be based on an analysis of the data reasonably available at the time, of the prevalence of risk factors, including high or increasing rates of reported cases of child abuse and domestic violence; protective factors, buffers, assets; or other variables identified through scientifically based research that occur in schools and communities.

Principle Five: A program or activity shall include meaningful and ongoing consultation with and input from parents in the development of the application and administration of the program or activity.

F. Research-Based Program Requirements

Programs and services may include research-based drug and violence prevention programs, community-wide planning, organizing and training activities, youth mentoring, and other research-based programs. In accordance with the federal *Principles of Effectiveness*, programs and activities shall be based on scientifically-based research demonstrating that the prevention program to be used will reduce violence or illegal drug use. The following links identify a range of effective and research-based program. At minimum, applicants must incorporate one of these identified programs.

U.S Dept of Education, Exemplary & Promising Programs
<http://www.ed.gov/admins/lead/safety/exemplary01/exemplary01.pdf>

Center for Substance Abuse Prevention @ <http://www.modelprograms.samhsa.gov>

Center for Disease Control and Prevention @ <http://www.cdc.gov/hiv/projects/rep/compend.html>

National Institute of Drug Abuse @ <http://www.nida.nih.gov/prevention/prevopen.html>

Office of Juvenile Justice and Delinquency Prevention @ <http://www.colorado.edu/cspv/blueprints/index.html> and
Strengthening Families @ <http://www.surgeongeneral.gov/library/youthviolence/chapter5/appendix5b.html>

G. Other Information

Awards: ODCP is expecting to award 40 grants with \$2 million available under this initiative, however, ODCP reserves the right to fund or reject the proposed project in whole or in part, or deny funding completely. In some cases, ODCP may award funds only for a specific component of an application or award fewer than the anticipated number of grants. ODCP has not determined a specific number of awards in each of the three program areas; however, a greater emphasis will be on full-year prevention programs.

Initiation of the Project: Except for summer programs, the project must be operational within 60 days of the original start date of the contract. If the project is not operational during this time, ODCP may cancel the contract and award the funds to another eligible applicant.

Liability: The State of Michigan assumes *no responsibility or liability for costs incurred by the grantee before the signing of the contract*. The grantee will be required to meet applicable *Michigan Workers' Compensation* requirements and obtain *liability insurance*, which includes bonding of staff responsible for financial transactions.

Oral Presentations, Site Visits and Additional Information: Applicants may be required to make oral presentations or to provide additional information of their proposal to the Office of Drug Control Policy. Site visits, as necessary, may be scheduled by the Office of Drug Control Policy as part of the decision making process.

H. Responsibilities of Application Signatories

The Project Director, Financial Officer and Authorizing Official should be individuals with express authorization to act in the name of the applicant. The individuals commit to the terms and conditions of the grant and attest to the accuracy of all information that has been supplied by the applicant.

The **Project Director**, as designated by the applicant agency, is responsible for directing the implementation of the Governor's Discretionary Grant project.

The **Financial Officer** is the individual who is fiscally responsible for this project. This individual is responsible for ensuring accountability for the federal funds.

The **Authorizing Official** is the individual authorized by the applicant entity to enter into this agreement.

Note: MDCH/ODCP prohibits the same individual from signing in more than one category above.

Part II - Program Areas

The following program areas are available for funding under the Governor's Discretionary Grant program. Applications must be submitted under the appropriate program area. All prevention programs must comply with the federal *Principles of Effectiveness* and all programs and activities shall be based on scientifically based research demonstrating that the program to be used will reduce drug use or violence. Programs also must emphasize and promote academic achievement, and convey a clear and consistent message that acts of violence and use of drugs are wrong and harmful – a zero tolerance approach.

The U.S. Department of Education, the Substance Abuse and Mental Health Administration/Center for Substance Abuse Prevention, and other federal agencies have identified exemplary, promising, and model prevention programs based on

scientifically based research demonstrating that the program to be used will reduce violence or drug use, or in modifying behaviors or attitudes demonstrated to be precursors to or predictors of drug use and/or violence.

Applicants that intend to provide a ***Summer 2005 Community Prevention Program*** should apply under this category. If the applicant intends to offer a summer program as a part of a full-year program, the applicant should submit an application under the Full-Year Program categories. The application form will provide areas to specify the exact program start and end dates of the program.

Grant Period Summer 2005 Community Prevention Program:
June 1, 2005 – September 30, 2005

#2005A: *Summer 2005 Community Prevention Program*

Funds are available for summer research-based drug and/or violence prevention programs including mentoring, educational enrichment, skill building, and other related training targeting at-risk youth. Collaboration with community groups, law enforcement, neighborhood groups, local community health and other prevention organizations, senior citizens, and participation in service learning projects is encouraged. Equipment purchases are not permitted. Recreation may be one component of the program. Applicants seeking funding under this category must replicate one of the research-based programs described in Part I, Section F.

Grant Period for Other Grants: #2005B - #2005E
October 1, 2004 – September 30, 2005

#2005B: *Community Anti-Drug Coalition*

Funds are available for community anti-drug coalitions and to provide and expand opportunities for parents and communities to be involved in youth prevention. Activities may include dissemination of information about drugs and violence, development and implementation of community-wide drug and violence prevention planning and organizing, developing or strengthening community laws restricting drug use, improving neighborhood safety, and other environmental prevention strategies. Applicants should reflect on the priorities and conditions of local communities and must comply with the *Principles of Effectiveness* in designing, implementing, and evaluating the program.

#2005C: *Community Prevention Program*

Programs and services may include community- or school-based drug and violence prevention programs and activities, youth mentoring, educational enrichment, skill building, and other related scientifically based research programs and activities. Funded grantees must implement the program in a manner that faithfully replicates the program as it was originally conceptualized, implemented and tested. Applicants must also provide evidence of coordination and collaboration with schools and other local agencies or organizations.

#2005D: *After-School Prevention Programs Serving Youth in High-Priority School Communities*

Funds are available for quality after-school programs targeting primary/elementary and secondary school-age children and youth. Programs must incorporate research-based programs and strategies and be open to all youth in the community; including out-of-school youth and youth attending nonpublic schools. After-school programs play a role in positive youth development that ultimately benefit children, families, and communities. Programs also must offer positive opportunities for youth to learn new skills, and emphasize learning and academic achievement. Services must be in a safe and secure environment and must incorporate strong organization practices. (See *Michigan After-School Initiative 2003 Report* issued by Michigan Department of Education and Family Independence Agency, and the National School Age Care Alliance standards for more information on quality programs and services.)

#2005E: *Out-of-School Youth Prevention Programs*

Funds are available programs targeting youth not ordinarily served by schools. That is, youth in juvenile detention or alternative facilities, homeless or youth identified as runaways, and other high-risk youth. Collaboration with educational

institutions and community agencies is necessary to assure adequate coordinated services. Programs also must incorporate research-based strategies and programs.

Part III - Submission of Electronic Grant (E-Grant) Applications

All information required in the application is necessary and essential for ODCP to adequately review the proposed projects and to assure that federal requirements are met. ODCP is also requiring all applicants to use the new electronic grant application process for FY 2004-2005 grants. All applications must be submitted electronically via the Internet on or before Friday, April 16, 2004. Please note that applications may no longer be hand delivered or submitted in other written formats. Applications submitted after the deadline date will not be accepted and no extensions will be granted.

If you submitted an application using MAGIC for FY2003-2004, you may use the same user identification and password assigned at that time. If you do not remember your password, please contact Douglas Sheldon at 517-335-4322 for assistance.

Part IV - Project Expenses and Financial Responsibilities

A. Unallowable Expenses and Activities

1. Equipment over \$5,000.
2. Construction costs and/or renovation.
3. Drug treatment, medical expenses, or rehabilitative services.
4. Costs of applying for this grant (e.g., consultants, grant writers).
5. Any expenses incurred before the date of the contract.
6. Indirect cost rates or indirect administrative expenses (only direct costs permitted).
7. Lobbying or advocacy for particular legislative or administrative reform.
8. Legal fees.
9. First class travel.
10. Out-of-state trips, tours, excursions, amusement parks, sporting events.
11. Management or administrative training, conferences (only pre-approved project-related training).
12. Management studies or research and development (costs pertaining to evaluation are allowed).
13. Honorariums.
14. Fines and penalties.
15. Fund raising and any salaries or expenses associated with it.
16. Purchase of land.
17. Losses from uncollectible bad debts.
18. Memberships and agency dues, unless a specific requirement of the project (prior approval needed).
19. Contributions and donations.
20. Compensation to federal or state employees for travel or consulting fees.

B. Conditions on Expenses

Costs must be reasonable and necessary. If required by the parent agency, costs must be substantiated by competitive bids. All contracts and subcontracts require prior approval by the Office of Drug Control Policy. If detailed information is not included as part of the application process, the grantee must submit a request seeking approval once the contracts or subcontractors are identified.

Instructions for Preparing Demographic Grant Application Information

Demographic Information

Complete the Demographic Information page and submit as page one of the grant application. Complete this page as follows:

1. Applicant Agency. Enter the name and complete address of the applicant agency or the name of the fiduciary.
2. Implementing Agency. Enter the name and address of the agency responsible for implementing the project, if other than the applicant agency listed in number one, above.
3. Number of Youth and Parents Served (3a & 3b). Provide the number of youth and parents (if applicable), to be directly served by this project.
4. Project Title. Enter a descriptive title for this project.
5. Start Date/End Date of Program (5a & 5b). Enter the start date and end date of the program covered by this proposal. For full year grants, enter 10/1/04 to 9/30/05.

For Summer 2005 grants, enter 6/1/05 to 9/30/05.

6. Federal Employer ID Number. Enter the Federal Employer ID number (FEIN) for the applicant agency. This tax number is issued by the Internal Revenue Service.
7. Program Area. Check the appropriate box of the application you are submitting. Submit a separate application for each program for which you are applying.
8. GDG Funds Requested. Enter the total amount of Governor's Discretionary Grant funds you are requesting.
9. Certification. The Project Director, Financial Officer, and Authorizing Officer are certifying that the information presented in the application is correct and that the applicant agency agrees to comply with all the provisions of H.R. 1, the *No Child Left Behind* Act of 2001, Title IV, 21st Century Schools, Part A – Safe and Drug-Free Schools and Communities.
 - 9(a) **Project Director**. Provide the name and title, address, email address, telephone number, fax number, and date of the individual who will be directing this project.
 - 9(b) **Financial Officer**. Provide the name and title, address, email address, telephone number, fax number, and date of the individual who is fiscally responsible for this project.
 - 9(c) **Authorizing Official**. Provide the name and title, address, email address, telephone number, fax number, and date of the individual authorized by the applicant agency to enter into this agreement.

FY 2004-2005
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
No Child Left Behind Act of 2001
Title IV, Part A, Subpart 1: Safe and Drug-Free Schools and Communities Act

APPLICANT DEMOGRAPHIC INFORMATION

1. Applicant Agency (or agency serving as Fiduciary):			(ODCP Use Only)
Address:	City:	County:	Zip Code:
2. Implementing Agency & Address (if other than the applicant agency):	Phone Number:		3a. Number of Youth to be Directly Served:
4. Project Title:	5a. Start Date of Program:		3b. Number of Parents to be Directly Served
	5b. End Date of Program:		
7. Program Area (check one): <input type="checkbox"/> #2005A – Summer 2005 Community Prevention Program <input type="checkbox"/> #2005B – Community Anti-Drug Coalition <input type="checkbox"/> #2005C – Community Prevention Program <input type="checkbox"/> #2005D – After-School Prevention Programs Serving Youth in High-Priority School Communities <input type="checkbox"/> #2005E – Out-of-School Youth Prevention Programs			6. Federal Employer Identification Number (FEIN):
			8. Total Governor's Discretionary Grant funds requested:

9. Certification. We certify that the project proposed in this application meets applicable requirements of the Title IV, Part A: SDFSCA Governor's Discretionary Grant Program, that all information is correct, and that the applicant will comply with the provisions of all applicable state and federal laws.

9a. Project Director (Name and Title):			
Project Director's Address:	City:	E-Mail Address:	Phone Number:
	Zip Code:		FAX Number:

9b. Financial Officer (Name and Title):			
Financial Officer's Address:	City:	E-Mail Address:	Phone Number:
	Zip Code:		FAX Number:

9c. Authorizing Official (Name and Title):			
Authorizing Official's Address:	City:	E-Mail Address:	Phone Number:
	Zip Code:		FAX Number:

LEGISLATIVE JURISDICTION

County(s) in which project will operate:

Provide the following information for the applicant. If the program will operate in more than one county or legislative district, only list the legislative information for the main office or program headquarters.

	<i>District Number</i>	<i>Name of Elected Official</i>
State House District		
State Senate District Number		
Congressional District Number		

COPY

FY 2004-2005
Governor's Discretionary Grants

No Child Left Behind Act of 2001
Title IV, Part A, Subpart 1: Safe and Drug-Free Schools and Communities Act

ASSURANCES AND LICENSING INFORMATION

Program Assurances:

By checking the options below you are assuring that 1) the drug and violence prevention programs funded under the Governor's Discretionary Grants convey a clear and consistent message that acts of violence and the illegal use of drugs are wrong and harmful, and 2) any allocated funds will be used to increase, not supplant, the level of state, local, and other non-federal funds for drug and violence prevention program and activities.

- ☐ **Yes**, all programs funded under the Governor's Discretionary Grant convey a clear and consistent message that acts of violence and the illegal use of drugs are wrong and harmful.
- ☐ **Yes**, all allocated funds will be used to increase, not supplant, the level of state, local, and other non-federal funds for drug and violence prevention programs and activities. The funds awarded under the State Grants Program are used only to supplement the level of State, Local, and other non-Federal funds and not to replace funds that would have been available to conduct activities if SDFSCA funds had not been available.

Licensing Information:

Applicants receiving awards must meet the licensing requirements administered by the Michigan Department of Community Health, initially promulgated under P.A. 368 of 1978.

For more Division of Licensing Certification information on state licensing requirements, please contact the Department of Community Health, Bureau of Health Services, P.O. Box 30664, Lansing, MI 48909; telephone (517) 241-1970. The Division of Licensing Certification will determine whether a prevention license is required.

Do you currently have a Prevention License to conduct a prevention program in Michigan?

- ☐ **Yes** ☐ **No** - If **No**, please answer the following questions.

Have you applied for a State of Michigan Prevention License and currently waiting for the license?

- ☐ **Yes** ☐ **No**

**STATEMENT OF NONPUBLIC SCHOOL PARTICIPATION FOR TITLE IV, PART A, SAFE AND
DRUG-FREE SCHOOLS AND COMMUNITIES ACT
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005**

Overview:

For school districts with eligible nonpublic schools, the Legislation requires "meaningful and timely consultation" with private school officials. This must occur during the design and development of the Applicant's program. The decision for participation in this funding by the nonpublic schools should be determined **before the application is submitted.**

The Applicant must assure that eligible nonpublic schools have been consulted in all phases of the development and design of the project including consideration of: (1) which students will receive benefits, (2) how the students' needs will be identified, (3) what benefits will be provided, and (4) how the project will be evaluated. The Applicant shall maintain continuing administrative control and direction over funds and property that benefit students enrolled in private schools.

Will your program be providing prevention services to youth in private or nonpublic schools?

☐ **Yes** ☐ **No**

If **Yes**, list the schools of those participating in your program:

PROGRAM SUMMARY
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

Provide a clear and concise summary describing your proposed project. The summary should describe the prevention program, what you intend to accomplish during the grant period, the number of youth and parents you plan to directly serve, and the types of other programs provided to enhance the prevention program. *(Please limit your response to 1 - 2 pages.)*

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**NEEDS ASSESSMENT
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005**

Needs assessment information is collected prior to implementing a prevention program. Collecting and organizing data is instrumental to this process. Data should be collected from multiple sources and analyzed before identifying specific programs or performance measures. Raw data should be kept on file for local, state, or federal audits.

The decision to focus programs exclusively on a particular problem area should be based on the results of the needs assessment process, and should not precede collection and analysis of information on the nature and extent of the problem in a particular school or community. Applicants should use the results of their needs assessment to help them select programs or activities for implementation.

Instructions:

- 1) Identify the data sources, and provide the year used to complete the needs assessment. (*Check all that apply*)
- 2) Complete the objective analysis.
- 3) Identify the primary drug use.

* Summarize each data source of your comprehensive needs assessment including an objective analysis of the drug and violence problems in the schools and communities served. (Objective data means information not influenced by emotion, surmise, or personal opinion.)

☐ Law enforcement data (e.g. number of youth arrests, types of violations)

_____ Year

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NEEDS ASSESSMENT (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

☐ Juvenile court data (e.g. number of youth convictions, types of convictions)

_____ Year

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NEEDS ASSESSMENT (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

☐ Dropout data

_____ Year

COPY

NEEDS ASSESSMENT (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

☐ Search Institute Asset Survey

_____ Year

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NEEDS ASSESSMENT (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

☐ Local school data on drugs and violence

_____ Year

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NEEDS ASSESSMENT (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

☐ Local Family Independence Agency data _____ Year

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NEEDS ASSESSMENT (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

☐ Local Public Health data

_____ Year

COPY

NEEDS ASSESSMENT (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

☐ Substance Abuse Coordinating Agency data

_____ Year

COPY

NEEDS ASSESSMENT (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

☐ Community Mental Health data

_____ Year

COPY

NEEDS ASSESSMENT (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

☐ Local school delinquency and discipline data

_____ Year

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NEEDS ASSESSMENT (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

☐

Other:

Year

Name of Data Source

COPY

NEEDS ASSESSMENT (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

2) Include an objective analysis of the delinquency and discipline problems for the youth to be served by the proposed prevention program. *(Please limit response to ½ page.)*

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3) Based on your objective analysis, identify the primary drug or violence problem you plan to address in your proposed prevention program. *(Please limit response to ¼ page.)*

PROJECT DESIGN I
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

1. **Target Population:** Identify the target population and the extent to which the program is designed to address the needs of this target population. Include age levels and groups (out-of-school youth, parents, youth referred by the courts, etc.) to be served by your program. *(Please limit your response to 1 page.)*

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PROJECT DESIGN I (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

2. **Drug or Violence Prevention Program:** Describe the drug and/or violence prevention component of your proposed prevention program. Drug and/or violence prevention or education must be a part of each program application. *(Please limit your response to 1 page.)*

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PROJECT DESIGN I (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

3. **Program Description (other program components):** Describe the other program components NOT documented in the previous section, which help to enhance the prevention program you plan to implement, i.e., mentoring, tutoring. *(Please limit your response to 1 page.)*

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**PROJECT DESIGN II
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005**

4. **Research-Based Programs:** All prevention programs must be based on scientifically based research and best practice that provides evidence that the proposed program(s) or strategy(s) will reduce violence and/or drug use. The purpose of this section is to document which programs will be utilized in attaining a specific outcome goal. See Guidance Document for more details.

You must identify at least one research-based program you plan to implement. Please check the appropriate box(s).

D) U.S. DEPARTMENT OF EDUCATION

http://www.ed.gov/offices/OSDFS/exemplary01/2_intro2.html

U.S. Department of Education Exemplary Programs

- ☐ Athletes Training and Learning to Avoid Steroids (ATLAS)
- ☐ CASASTART (Striving Together to Achieve Rewarding Tomorrows)
- ☐ Life Skills Training
- ☐ OSLC (Oregon Social Learning Center) Treatment Foster Care
- ☐ Project ALERT
- ☐ Project Northland-Alcohol Prevention Curriculum
- ☐ Project T.N.T. – Toward No Tobacco Use
- ☐ Second Step: A Violence Prevention Curriculum
- ☐ Strengthening Families Program: For Parents and Youth 10-14

U.S. Department of Education Promising Programs

- ☐ Aggression Replacement Training
- ☐ Aggressors, Victims, and Bystanders: Thinking and Acting to Prevent Violence
- ☐ All Stars (Core Program)
- ☐ Al's Pals: Kids Making Healthy Choices
- ☐ Child Development Project
- ☐ Community of Caring
- ☐ Creating Lasting Family Connections
- ☐ Facing History and Ourselves
- ☐ Growing Healthy
- ☐ I Can Problem Solve (ICPS)
- ☐ Let Each One Teach One Mentor Program
- ☐ Linking the Interests of Families and Teachers (LIFT)
- ☐ Lions-Quest Skills for Adolescence
- ☐ Lions-Quest Working Towards Peace
- ☐ Michigan Model for Comprehensive School Health Education
- ☐ Minnesota Smoking Prevention Program
- ☐ Open Circle Curriculum
- ☐ PATHS Curriculum (Promoting Alternative Thinking Strategies)
- ☐ Peace Builders

PROJECT DESIGN II (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

- ☐ Peacemakers Program: Violence Prevention for Students in Grades Four through Eight
- ☐ Peers Making Peace
- ☐ Positive Action Program
- ☐ Preparing For The Drug Free Years (PDFY)
- ☐ Primary Mental Health Project
- ☐ Project STAR
- ☐ Responding in Peaceful and Positive Ways (RIPP)
- ☐ Say It Straight Training
- ☐ SCARE Program
- ☐ Seattle Social Development Project Development Research and Programs, Inc.
- ☐ SMART Team (Students Managing Anger & Resolution Together)
- ☐ Social Decision Making/Problem Solving
- ☐ Teenager Health Teaching Modules
- ☐ The Think Time Strategy

II) Substance Abuse and Mental Health Services Administration Center for Substance Abuse Prevention (CSAP)
<http://www.SAMHSA.gov>

- ☐ Please identify the CSAP program(s) you plan to utilize:

Center for Disease Control and Prevention
<http://www.cdc.gov/hiv/projects/rep/compend.htm>

National Institute of Drug Abuse
<http://www.nida.nih.gov/prevent/prevopen.html>

Office of Juvenile Justice and Delinquency Prevention
<http://www.colorado.edu/cspv/blueprints/index.html>

Office of the Surgeon General
<http://www.surgeongeneral.gov/library/youthviolence/chapter5/appendix5b.html>

III) Other Federally-Recognized Program

Name of Research-Based Program:

Identify Program Web Site:

Comments: Please insert any additional comments in the following field. *(Please limit your response to ¼ page.)*

PROJECT DESIGN III
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

5. **Linkages Between Program and Needs:** Describe the linkages between your proposed prevention program and the needs assessment you identified to justify the proposal program. *(Please limit your response to ¼ page.)*

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6. **Program Schedule:** Provide program timelines and daily or weekly schedules. This description should describe the proposed day-to-day program, and daily or weekly program schedule of activities. For example, if your prevention program is planned for after school or on weekends, provide the exact days, hours, and location, as well as the specific services offered each day. Type a description below. *(Please limit your response to ¼ page.)*

PROJECT DESIGN III (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

DAYS OF THE WEEK	PROGRAM/ACTIVITIES	LOCATION
Sunday		
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		

PROJECT DESIGN III (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

How long will your program be conducted?

☐

1 Month

☐

6 Month

☐

9 Months

☐

Other _____

Is the program schedule repeated?

☐

Yes

☐

No

7. **Coordination and Collaboration:** Identify the schools and community based services/programs providing services to the target population. Describe how the program or activities offered complement and support activities of the prevention program. *(Please limit your response to ½ page.)*

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**MANAGEMENT PLAN AND PROJECT ORGANIZATION I
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005**

1. **Management Structure:** Provide other management or agency information assuring administrative oversight of the proposed prevention program. *(Please limit your response to ¼ page.)*

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MANAGEMENT PLAN AND PROJECT ORGANIZATION II
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

2. **Project Staffing:** Please complete the following information for each permanent or part-time employee on the payroll assigned directly to the program.

Name _____

Title _____

Qualifications: *(Please limit your response to ¼ page.)*

Responsibilities: *(Please limit your response to ¼ page.)*

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Prevention Expertise and Experience Working with Youth/Community Programs: *(Please limit your response to ¼ page.)*

Number of program hours per week _____

MANAGEMENT PLAN AND PROJECT ORGANIZATION III
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

3. **Subcontractors:** Subcontractors are those individuals hired to provide a particular service for your program. If the subcontractors have not been determined, the program is required to submit this information to the Office of Drug Control Policy for their approval, prior to subcontracting with an individual or organization.

Will you be funding subcontractors to provide services for your program?

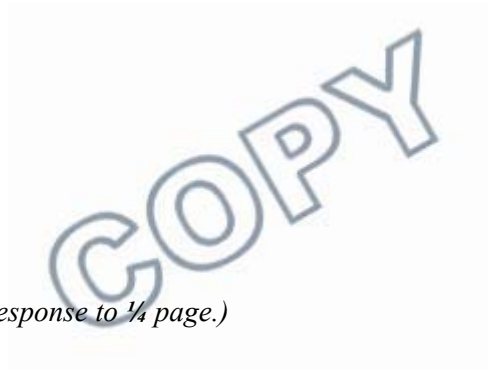
☐ YES ☐ NO

If **Yes**, please provide the following information:

Name _____

Position Title _____

Responsibilities *(Please limit your response to ¼ page.)*



Prevention Expertise *(Please limit your response to ¼ page.)*

Knowledge and Experience Working with Youth/Community Programs: *(Please limit your response to ¼ page.)*

Number of program hours per week _____

**COMMUNITY ADVISORY COUNCIL
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005**

"All GDG grantees must have a Community Advisory Council in place to oversee the program and assist the program in a variety of ways. An Applicant may use the agency's current advisory council, a subcommittee of the advisory council or establish a new advisory council for this grant; whichever meets their needs."

Instructions: The following are required for the Advisory Council. (Please check all boxes, & other if applicable.)

- ☐ Review and provide comments on the Governor's Discretionary Grant application prior to submission.
- ☐ Disseminate information about drug and violence prevention programs conducted within the boundaries of the applicant's geographic area.
- ☐ On an ongoing basis, advise the applicant regarding how best to coordinate the applicant's Governor's Discretionary Grant funded activities with other related strategies, programs, and activities in the community and region.
- ☐ Review the program evaluation plan and results and make recommendations to improve the applicant's drug and violence prevention program.
- ☐ Other council activities (*Please describe limiting your response to ¼ page.*)

The local advisory council should include, to the extent possible, representatives of various community organizations and stakeholder groups.

Student(s)

Name _____ Grade Level _____

Name _____ Grade Level _____

Role: (*Please limit your response to ¼ page.*)

Teacher, principal, administrator or education representative

Name _____ Title _____

Role: (*Please limit your response to ¼ page.*)

COMMUNITY ADVISORY COUNCIL (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

Senior Citizen

Name _____ Title _____

Role: *(Please limit your response to ¼ page.)*

Juvenile Justice and/or Probate Court

Name _____ Organization _____

Role: *(Please limit your response to ¼ page.)*



Prevention Specialist

Name _____ Organization _____

Role: *(Please limit your response to ¼ page.)*

Human Service Agency

Name _____ Organization _____

Role: *(Please limit your response to ¼ page.)*

COMMUNITY ADVISORY COUNCIL (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

Community-based organization

Name _____ Organization _____

Role: *(Please limit your response to ¼ page.)*

Parent

Name _____

Name _____

Role: *(Please limit your response to ¼ page.)*

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Other

Name _____

Name _____

Role: *(Please limit your response to ¼ page.)*

**PARENT INVOLVEMENT INFORMATION
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005**

In accordance with the federal statute, parents must be consulted in the development of, and have an opportunity to provide input concerning, the application for program funds and the administration of any program or activity implemented with Title IV, Part A, Subpart 1: Safe and Drug-Free Schools and Communities Act funds. Although the statute doesn't specify how often consultation must take place, it does prescribe a meaningful and ongoing consultation and input process.

Parent(s)

Name _____

Name _____

Name _____

Describe the parent input in the development of the application and implementation of the proposed program and activities.
(Please limit your response to $\frac{1}{4}$ page.)

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OUTCOME GOAL(S) GOVERNOR'S DISCRETIONARY GRANT APPLICATION FY 2004-2005

Instructions: Below are a series of questions for the development of an outcome goal. Outcome goals must provide specific information to determine a change in attitude or behavior regarding reduced violence or drug use of the target population. In addition, the decision to focus a program exclusively on a particular problem area should be based on the results of the needs assessment process.

A minimum of one outcome goal is required for submission of the application, however, more than one outcome goal is allowed. The following buttons will assist you in the development of your goal(s):

- Click **Save**, upon completion of the following questions.
- Click **View PDF**, to display your outcome goal statement in the appropriate format.
- Click **View Example**, in the footer or header, to view an example of a good outcome goal.
- Click **Add**, to enter more than one outcome goal.
- Click **Delete**, to delete the goal you are viewing.
- Click **Go**, to return to a saved goal.

1. Goal Number _____

Note: Every outcome goal must have a unique number to link it to the research-based prevention program(s) you plan to implement. The goal number should be a whole number.

2. What type of attitude or behavior will change? (check only one box)

☐ Drug use – behavior

☐ Violence – behavior

☐ Drug use – attitude

☐ Violence – attitude

3. Who is expected to change? The individuals selected below are the target population(s) for this specific goal:

Target Population

Estimated Number to be served

☐ Pre-Kindergarten

☐ Elementary Students (K-5)

☐ Middle School Students (6-8)

☐ High School Students (9-12)

School age youth not in school:

☐ Homeless

☐ Drop Outs

☐ Incarcerated

☐ Detention

☐ Other

☐ Parents or guardians

☐ Teachers and other school personnel

☐ Law Enforcement Officials

☐ Other (*please specify*)

OUTCOME GOAL(S) (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

4. What type of change is expected?

State whether an increase, decrease, or stabilization will occur and then describe the specific change that will take place.

5. What is the percentage of change you expect of the program participants? _____

6. When do you expect the change to occur? (mm/dd/yyyy) _____

7. Indicate the research-based prevention program(s) that will be implemented to achieve this outcome goal.

Enter the name exactly shown on the U.S. Dept. of Education Exemplary and Promising Programs, Substance Abuse and Mental Health Services Administration/Center for Substance Abuse Prevention, and other federal agencies having identified exemplary, promising, and model prevention programs. One program and implementation date is required. Up to three programs with implementation dates can be entered per goal.

These programs are listed in Project Design - Part II of this application.

Name of Program	Date of Implementation
_____	_____
_____	_____
_____	_____

8. Methods of Measurement: How will you know if the outcome goal has been achieved? In order to determine whether an increase, decrease, or stabilization has resulted due to the implementation of the program, measurements must be taken prior to program implementation and upon completion of the program. All programs must measure progress in achieving their goals.

A pre-and post-test is recommended. Comparing the results of the pre- and post-tests allows the amount of change to be identified.

Please check as appropriate:

☐ Valid and reliable pre/post survey of target group participants (e.g., CDC survey)

Name of Instrument:

☐ Pre/post test program record review (e.g., student disciplinary records)

Type of Review:

☐ Valid and reliable interview protocol (recommended for participants 9 years of age and under).

Describe:

OUTCOME GOAL(S) (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

- ☐ Focus Groups
- ☐ Key Informant Interviews
- ☐ Other (*please describe*)

9. Pre-Program Data Collection: (*collect prior to program implementation*)

Who will collect the data?	When will the data be collected?	Where will the data be collected?
	COPY	

10. Post-Program Data Collection: (*collect at conclusion of program*)

Who will collect the data?	When will the data be collected?	Where will the data be collected?

PROCESS GOAL(S)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

Process goals determine program implementation and participation. These measures may include attendance data, participant feedback, and whether program delivery adhered to implementation guidelines. As such, process data can reveal how a program was implemented. The data, in turn, may explain the success or failure of the program. For example, if a program is designed to be delivered sequentially and with peer leaders, but process data reveal that the program was delivered out of sequence and with other leaders, one can gain a better understanding of why the program may have failed to achieve the desired effect.

Please complete the following questions to develop a Program Implementation Process Goal or a Program Participation Process Goal. Complete all the questions, then click **Save**.

- Click **View PDF**: to display your process goal statement in the appropriate format.
- Click **View Example**: click on the header or footer to view an example of a good process goal.
- Click **Add**: to enter more than one process goal
- Click **Go**: to return to a saved process goal
- Click **Delete**: to delete the goal you are viewing

1. Process Goal Number _____

Note: Every outcome goal must have a unique number to link it to the research-based prevention program(s) you plan to implement. The goal number should be a whole number.

2. When do you expect to achieve this process goal? (mm/dd/yyyy) _____

3. Who will be the program facilitators/presenters?

4. What is the number of program lessons you expect to implement by the date indicated in question 2?

5. What specific topics will be covered in the program(s)?

6. Indicate the research-based prevention program(s) that will be implemented to achieve this process goal.

Enter the name exactly shown on the U.S. Dept. of Education Exemplary and Promising Programs, Substance Abuse and Mental Health Services Administration/Center for Substance Abuse Prevention, and other federal agencies having identified exemplary, promising, and model prevention programs. One program and implementation date is required. Up to three programs with implementation dates can be entered per goal.

Name of Program

Date of Implementation

PROCESS GOAL(S) (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

7. How many participants are expected to receive the program(s) by the 'date indicated' in question 2? _____
8. What is the average number of participants expected to attend the program? _____
9. Who is the targeted population?

Target Population	Estimated Number to be Served
<input type="checkbox"/> Pre-Kindergarten	_____
<input type="checkbox"/> Elementary Students (K-5)	_____
<input type="checkbox"/> Middle School Students (6-8)	_____
<input type="checkbox"/> High School Students (9-12)	_____
School age youth not in school:	
<input type="checkbox"/> Homeless	_____
<input type="checkbox"/> Drop Outs	_____
<input type="checkbox"/> Incarcerated	_____
<input type="checkbox"/> Detention	_____
<input type="checkbox"/> Other	_____
<input type="checkbox"/> Parents or guardians	_____
<input type="checkbox"/> Teachers and other school personnel	_____
<input type="checkbox"/> Law Enforcement Officials	_____
<input type="checkbox"/> Other (<i>please specify</i>)	_____

10. Data Collection

Who will collect the process data?	When will the process data be collected?

EVALUATION
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

The federal Principles of Effectiveness require that programs implemented with SDFSCA funds be designed to prevent or reduce violence and illegal drug use. Performance measures must include goals that relate to reduced violence or drug use. Recipients may also adopt goals related to changing attitudes that are predictors of or precursors to youth drug use or violent behavior, or goals related to the quality of program implementation. *The evaluation plan must contain information on the following: the program is being implemented as planned, the program has reached the targeted population, and the program is having the anticipated impact.*

1. Evaluation Plan

Describe how you plan to evaluate whether you are achieving your goals and how you will determine whether your proposed program is effective. *(Please limit your response to ¼ page.)*

2. Responsibility for program evaluation *(check at least one box)*

☐ The goals will be evaluated by the agency implementing the prevention program. The agency assumes responsibility and will perform the evaluation tasks.

☐ The goal(s) will be evaluated by a subcontracted individual or agency who has not been determined at this time. (The program is required to submit this information to the Office of Drug Control Policy for approval prior to subcontracting with an individual or agency.)

☐ The goal(s) will be evaluated by a subcontracted individual or agency and assumes responsibility for data collection and evaluation.

Subcontractor's Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Subcontractor's Expertise: *(Please limit your response to ¼ page.)*

EVALUATION (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

3. Evaluation Results

Under Title IV, Part A, the program or activity shall undergo a periodic evaluation to assess its progress towards reducing violence and illegal drug use based on performance measures.

Describe how you plan to use the evaluation results to refine, improve, and strengthen the prevention program, and to refine the performance measures. Also, describe how the results will be made available to the public and that results can be obtained upon request. *(Please limit your response to ¼ page.)*

COPY

**CONTINUATION FUNDING
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005**

Are you applying for continuation funds for a program previously funded with Governor's Discretionary Grant funds?

☐ **YES**

☐ **NO**

If **Yes**, please describe the present and past achievement and results as well as the effect the program has had on reducing and preventing drug use and violence. Provide the statistical data and evaluation results to support these achievements. *(Please limit your response to ½ page.)*

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BUDGET ITEM SUMMARIES
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

Please provide an explanation of the *Salaries and Wages* for the Total Expenditures.

Please provide an explanation of the *Fringe Benefits* for the Total Expenditures.



Please provide an explanation of the *Travel* for the Total Expenditures.

BUDGET ITEM SUMMARIES (cont'd)
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

Please provide an explanation of the *Supplies and Materials* for the Total Expenditures.

Please provide an explanation of the *Contractual (Subcontracts)* for the Total Expenditures.



Please provide an explanation of the *Other Expenses* for the Total Expenditures.

PROGRAM BUDGET SUMMARY
GOVERNOR'S DISCRETIONARY GRANT APPLICATION
FY 2004-2005

Program:			Date Prepared:	Page:	Of:
Contractor Name:			Budget Period:		
Mailing Address:			Budget Agreement: <input type="checkbox"/> Original <input type="checkbox"/> Amendment		Amendment Number:
City:	State:	Zip Code:	Payee Federal ID Number:		

EXPENDITURE CATEGORY		STATE FUNDS	LOCAL MATCH		TOTAL BUDGET
1.	Salaries and Wages				
2.	Fringe Benefits				
3.	Travel				
4.	Supplies and Materials				
5.	Contractual (Subcontracts)				
6.	Equipment				
7.	Other Expenses				
8.	TOTAL DIRECT EXPENDITURES				
9.	TOTAL EXPENDITURES				

SOURCE OF FUNDS		STATE FUNDS	LOCAL MATCH		TOTAL BUDGET
10.	State Agreement				
11.	Fees and Collections				
12.	Local				
13.	Federal				
14.	Other (s)				
15.	TOTAL FUNDING				

Authority: P.A. 368 of 1978 Completion: Is Voluntary, but is required as a condition of funding.	The Department of Community Health is an equal opportunity employer, service, and programs provider.
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MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

		PROGRAM BUDGET COST DETAIL		Page		of	
PROGRAM		CODE	BUDGET PERIOD		DATE PREPARED		
			to				
		ORIGINAL BUDGET		AMENDED BUDGET	AMENDMENT NUMBER		
1. SALARY AND WAGES		POSITIONS REQUIRED	TOTAL SALARY	COMMENTS			
TOTAL SALARIES AND WAGES							
2. FRINGE BENEFITS (specify)							
<input type="checkbox"/> FICA <input type="checkbox"/> LIFE INS. <input type="checkbox"/> DENTAL INS <input type="checkbox"/> UNEMPLOY INS. <input type="checkbox"/> VISION INS. <input type="checkbox"/> WORK COMP <input type="checkbox"/> RETIREMENT <input type="checkbox"/> HEARING INS. <input type="checkbox"/> HOSPITAL INS. <input type="checkbox"/> OTHER				<input type="checkbox"/> COMPOSITE RATE AMOUNT _____ %			
				TOTAL FRINGE BENEFITS		\$	
3. TRAVEL (specify if any item exceeds 10% of Total Expenditures)						\$	
4. SUPPLIES AND MATERIALS (specify if any item exceeds 10% of Total Expenditures)						\$	
5. CONTRACTUAL (SUBCONTRACTS)						\$	
<u>NAME</u>		<u>ADDRESS</u>	<u>AMOUNT</u>				
6. OTHER EXPENSES (specify if any item exceeds 10% of Total Expenditures)						\$	
7. TOTAL DIRECT EXPENDITURES (sum of Totals 1-7)						\$	
8. INDIRECT COST CALCULATIONS							
		Rate #1: Base \$	X Rate	% TOTAL			
9. TOTAL EXPENDITURES (sum of lines 8-9)						\$	